AMENDED IN SENATE JULY 1, 2014 AMENDED IN SENATE JUNE 17, 2014 AMENDED IN ASSEMBLY MAY 20, 2014 AMENDED IN ASSEMBLY MAY 5, 2014

CALIFORNIA LEGISLATURE—2013-14 REGULAR SESSION

ASSEMBLY BILL

No. 2679

Introduced by Assembly Members Logue and Nestande (Coauthors: Assembly Members Hagman and Wilk) (Coauthor: Senator Vidak)

February 21, 2014

An act to amend Sections—5613, 5772, and 5847 5613 and 5772 of the Welfare and Institutions Code, relating to mental health.

LEGISLATIVE COUNSEL'S DIGEST

AB 2679, as amended, Logue. County mental health services: baseline reports.

(1) Existing

Existing law, the Bronzan-McCorquodale Act, sets out a system of community mental health care services provided by counties and administered by the State Department of Health Care Services. The act requires the Director of Health Care Services to establish a Performance Outcome Committee, as specified, and requires the committee to develop measures of performance for evaluating client outcomes and cost effectiveness of mental health services provided by counties, as specified. The act requires counties to annually report data on these performance measures to local mental health advisory boards and to

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the director. The act requires the director to annually make this county performance data available to the Legislature, as specified.

This bill would additionally require the director to annually post the county performance data described above on the department's Internet Web site.

The act also establishes the California Mental Health Planning Council, which purpose is to fulfill certain mental health planning requirements mandated by federal law. The act also requires the council, among other things, to review program performance in delivering mental health services based on specified data and reports, and to report findings and recommendations on programs' performance annually to the Legislature, the department, and the local boards.

This bill would require the council to post these findings and recommendations annually on the council's Internet Web site.

(2) Existing law, the Mental Health Services Act, an initiative measure enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, establishes the continuously appropriated Mental Health Services Fund to fund various county mental health programs. Existing law establishes the Mental Health Services Oversight and Accountability Commission to oversee the administration of various parts of the Mental Health Services Act. The act provides that it may be amended by the Legislature by a ¾ vote of each house as long as the amendment is consistent with and furthers the intent of the act, and that the Legislature may also clarify procedures and terms of the act by majority vote.

Existing law authorizes the commission to obtain data and information from certain state and local entities to utilize in its oversight, review, training and technical assistance, accountability, and evaluation regarding projects and programs supported by the act, as specified. Existing law requires each county mental health program to prepare and submit a 3-year program and expenditure plan, and annual updates, to the commission that includes specified components, including, among other things, a program for services to adults and seniors, as specified.

This bill would require the 3-year plan to include information requested by the commission pursuant to the provisions described above to assist the commission in its oversight of the county's program for services to adults and seniors, as specified.

This bill would declare that it clarifies procedures and terms of the Mental Health Services Act.

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Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

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The people of the State of California do enact as follows:

- SECTION 1. Section 5613 of the Welfare and Institutions Code is amended to read:
- 5613. (a) Counties shall annually report data on performance measures established pursuant to Section 5612 to the local mental health advisory board and to the Director of Health Care Services.
 - (b) The Director of Health Care Services shall annually make data on county performance available to the Legislature, and post that data on the department's Internet Web site, by no later than March 15 of each year.
- SEC. 2. Section 5772 of the Welfare and Institutions Code is amended to read:
 - 5772. The California Mental Health Planning Council shall have the powers and authority necessary to carry out the duties imposed upon it by this chapter, including, but not limited to, the following:
 - (a) To advocate for effective, quality mental health programs.
 - (b) To review, assess, and make recommendations regarding all components of California's mental health system, and to report as necessary to the Legislature, the State Department of Health Care Services, local boards, and local programs.
 - (c) To review program performance in delivering mental health services by annually reviewing performance outcome data as follows:
 - (1) To review and approve the performance outcome measures.
 - (2) To review the performance of mental health programs based on performance outcome data and other reports from the State Department of Health Care Services and other sources.
 - (3) To report findings and recommendations on the performance of programs annually to the Legislature, the State Department of Health Care Services, and the local boards, and to post those findings and recommendations annually on its Internet Web site.
 - (4) To identify successful programs for recommendation and for consideration of replication in other areas. As data and technology are available, identify programs experiencing difficulties.

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(d) When appropriate, make a finding pursuant to Section 5655 that a county's performance is failing in a substantive manner. The State Department of Health Care Services shall investigate and review the finding, and report the action taken to the Legislature.

- (e) To advise the Legislature, the State Department of Health Care Services, and county boards on mental health issues and the policies and priorities that this state should be pursuing in developing its mental health system.
- (f) To periodically review the state's data systems and paperwork requirements to ensure that they are reasonable and in compliance with state and federal law.
- (g) To make recommendations to the State Department of Health Care Services on the award of grants to county programs to reward and stimulate innovation in providing mental health services.
- (h) To conduct public hearings on the state mental health plan, the Substance Abuse and Mental Health Services Administration block grant, and other topics, as needed.
- (i) In conjunction with other statewide and local mental health organizations, assist in the coordination of training and information to local mental health boards as needed to ensure that they can effectively carry out their duties.
- (j) To advise the Director of Health Care Services on the development of the state mental health plan and the system of priorities contained in that plan.
- (k) To assess periodically the effect of realignment of mental health services and any other important changes in the state's mental health system, and to report its findings to the Legislature, the State Department of Health Care Services, local programs, and local boards, as appropriate.
- (1) To suggest rules, regulations, and standards for the administration of this division.
- (m) When requested, to mediate disputes between counties and the state arising under this part.
- (n) To employ administrative, technical, and other personnel necessary for the performance of its powers and duties, subject to the approval of the Department of Finance.
- (o) To accept any federal fund granted, by act of Congress or by executive order, for purposes within the purview of the California Mental Health Planning Council, subject to the approval of the Department of Finance.

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(p) To accept any gift, donation, bequest, or grants of funds from private and public agencies for all or any of the purposes within the purview of the California Mental Health Planning Council, subject to the approval of the Department of Finance.

- SEC. 3. Section 5847 of the Welfare and Institutions Code is amended to read:
- 5847. Integrated Plans for Prevention, Innovation, and System of Care Services.
- (a) Each county mental health program shall prepare and submit a three-year program and expenditure plan, and annual updates, adopted by the county board of supervisors, to the Mental Health Services Oversight and Accountability Commission within 30 days after adoption.
- (b) The three-year program and expenditure plan shall be based on available unspent funds and estimated revenue allocations provided by the state and in accordance with established stakeholder engagement and planning requirements as required in Section 5848. The three-year program and expenditure plan and annual updates shall include all of the following:
- (1) A program for prevention and early intervention in accordance with Part 3.6 (commencing with Section 5840).
- (2) A program for services to children in accordance with Part 4 (commencing with Section 5850), to include a program pursuant to Chapter 4 (commencing with Section 18250) of Part 6 of Division 9 or provide substantial evidence that it is not feasible to establish a wraparound program in that county.
- (3) A program for services to adults and seniors in accordance with Part 3 (commencing with Section 5800).
- (4) A program for innovations in accordance with Part 3.2 (commencing with Section 5830).
- (5) A program for technological needs and capital facilities needed to provide services pursuant to Part 3 (commencing with Section 5800), Part 3.6 (commencing with Section 5840), and Part 4 (commencing with Section 5850). All plans for proposed facilities with restrictive settings shall demonstrate that the needs of the people to be served cannot be met in a less restrictive or more integrated setting.
- (6) Identification of shortages in personnel to provide services pursuant to the above programs and the additional assistance

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needed from the education and training programs established pursuant to Part 3.1 (commencing with Section 5820).

- (7) Establishment and maintenance of a prudent reserve to ensure the county program will continue to be able to serve children, adults, and seniors that it is currently serving pursuant to Part 3 (commencing with Section 5800), the Adult and Older Adult Mental Health System of Care Act, Part 3.6 (commencing with Section 5840), Prevention and Early Intervention Programs, and Part 4 (commencing with Section 5850), the Children's Mental Health Services Act, during years in which revenues for the Mental Health Services Fund are below recent averages adjusted by changes in the state population and the California Consumer Price Index.
- (8) Certification by the county mental health director, which ensures that the county has complied with all pertinent regulations, laws, and statutes of the Mental Health Services Act, including stakeholder participation and nonsupplantation requirements.
- (9) Certification by the county mental health director and by the county auditor-controller that the county has complied with any fiscal accountability requirements as directed by the State Department of Health Care Services, and that all expenditures are consistent with the requirements of the Mental Health Services Act.
- (10) Information requested by the commission pursuant to paragraph (6) of subdivision (d) of Section 5845 to assist the commission in its oversight of the program described in paragraph (3) of this subdivision. This information may include, but is not limited to, estimates of the number of additional people who meet the criteria for services pursuant to Part 3 (commencing with Section 5800) and are not receiving services that meet the criteria for that part. These estimates shall be based on existing available data and not include duplicative reporting requirements.
- (c) The programs established pursuant to paragraphs (2) and (3) of subdivision (b) shall include services to address the needs of transition age youth ages 16 to 25. In implementing this subdivision, county mental health programs shall consider the needs of transition age foster youth.
- (d) Each year, the State Department of Health Care Services shall inform the California Mental Health Directors Association and the Mental Health Services Oversight and Accountability

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Commission of the methodology used for revenue allocation to the counties.

- (e) Each county mental health program shall prepare expenditure plans pursuant to Part 3 (commencing with Section 5800) for adults and seniors, Part 3.2 (commencing with Section 5830) for innovative programs, Part 3.6 (commencing with Section 5840) for prevention and early intervention programs, and Part 4 (commencing with Section 5850) for services for children, and updates to the plans developed pursuant to this section. Each expenditure update shall indicate the number of children, adults, and seniors to be served pursuant to Part 3 (commencing with Section 5800), and Part 4 (commencing with Section 5850), and the cost per person. The expenditure update shall include utilization of unspent funds allocated in the previous year and the proposed expenditure for the same purpose.
- (f) A county mental health program shall include an allocation of funds from a reserve established pursuant to paragraph (7) of subdivision (b) for services pursuant to paragraphs (2) and (3) of subdivision (b) in years in which the allocation of funds for services pursuant to subdivision (e) are not adequate to continue to serve the same number of individuals as the county had been serving in the previous fiscal year.
- SEC. 4. The Legislature finds and declares that this act clarifies procedures and terms of the Mental Health Services Act within the meaning of Section 18 of the Mental Health Services Act.